21-40544

FORM D

UNITED STATES
SECURITIES AND EXCHANGE
COMMISSION
Washington, D.C. 20549



PROCESCED

MAR 1 9 2002

THOMSON
FINANCIAL

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING

EXEMPTION

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Prefix		Serial
DA	TE RECEIV	ED

Name of Offering (check if this is an amendment and name has changed, and indicate change) PlantAmerica, Inc., Private Placement of Series B Preferred Stock Filing Under (Check box(es) that apply):			
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☐ Rule 50	06 RECEIVED (6) ULOE	
Type of Filing: New Filing Amen	dment		
	A. BASIC IDENTIFICATION DATA	FEB 1 4 EULE	
1. Enter the information requested about the issu	er	for	
PlantAmerica, Inc., Private Placement of Series B Preferred Stock Filing Under (Check box(es) that apply):			
PlantAmerica, Inc.	Rule 504		
PlantAmerica, Inc. Address of Executive Offices Address of Executive Offices (Number and Street, City, State, Zip Code) Arlington, VA 22203 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Telephone Number (Including Area Code)			
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change). PlantAmerica, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) 4350 North Fairfax Drive, Suite 350 Arlington, VA 22203 (703) 12-2841 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business On-line distributor of lawn and garden content and products. Type of Business Organization			
Filing Under (Check box(es) that apply):			
On-line distributor of lawn and garden content an	d products.		
Type of Business Organization			
□ corporation □	limited partnership, already formed	other (please specify):	
business trust	limited partnership, to be formed		
	Month Year		
Actual or Estimated Date of Incorporation or Ors	,	X Actual ☐ Estimated	
		State: DE	
CN for Canada: FN for other foreign in			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENT	IFICATION DATA		
2. Enter the information re	equested for the fol	llowing:			
·		uer has been organized within		•	
 Each beneficial ow the issuer; 	ner having the pov	ver to vote or dispose, or direc	et the vote or disposition of, 10	0% or more of a class	of equity securities of
Each general and n	nanaging partner of	f partnership issuers.			*
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		•		
Lee Pryor					
Business or Residence Address	ss (Number and Stree	t, City, State, Zip Code)			*
4350 North Fairfax Drive S	uite 350, Arlington,	, VA 22203.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
PlantAmerica, LLC					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
4350 North Fairfax Drive S	uite 350, Arlington	, VA 22203			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Madison Ventures			21 A. C.		
Business or Residence Address	ss (Number and Stree	t, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	· Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Webel, Richard C.					
Business or Residence Address The Studio, Box 506, Local					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director □	General and/or Managing Partner
Full Name (Last name first, if Pryor, Samuel F.	individual)				
Business or Residence Addre. 645 5 th Avenue, 18 th Floor		et, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, it	individual)				
Bennett, Edward G.R.					
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
115 Church Street, Charles	ton, SC 29401				÷ .
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				·
Schiff, Peter G.					
Business or Residence Addre	•	•			
485 Underhill Boulevard,	Suite 205, Syosset,	New York 11791			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Check Box(es) that Apply: ,	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if McPartland, Thomas P.	individual)				
Business or Residence Address	s (Number and Stree	et, City, State; Zip Code)			1.1 .
145 Glenlawn Avenue, Sea				,	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☑ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Albizo, Joe		· · · · · · · · · · · · · · · · · · ·	·		
Business or Residence Address 4350 North Fairfax Drive Su				·	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Kirsch, Peter P.	individual)				
Business or Residence Address 4204 Ambler Drive, Kensing	`	a, City, State, Zip Code)			,
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Stree	n, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

١.	Enter the aggregate offering price of securities included in this offering and the total number already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Deht	\$0	\$0
	Equity	\$0	\$0
	☐ Common ☑ Preferred	\$970,000.00	\$970,000.00
-	Convertible Securities (Including warrants)	\$0	\$0
	Partnership Interests	\$0	\$ 0
	Other (Specify)	\$	\$ -0
	Total	\$970,000.00	\$970,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	477,0400000	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		NIh	Aggregate Dollar
		Number Investors	Amount of Purchases
	Accredited Investors	11	\$970,000.00
	Non-accredited Investors	0	\$ 0
	Ton decrease in vestore		<u> </u>
	Total (for filings under Rule 504 only)	0	\$ 0
	Answer also in Appendix, Column 4, if filing under ULOE.	•	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		·
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	Solu
	Regulation A		<u> </u>
			2
	Rule 504		\$
	Total		\$
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$ <u> </u>
	Legal Fees.		\$50,000.00
	Accounting Fees		\$0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify)*		\$ 0
			-
	Total		\$50,000.00
	·		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

^{*} Bear Stearn & Co. Inc. is receiving fees for providing business advisory services in relation to this private placement.

b. Enter the difference between the aggregate offering price given in response to Part C - Question	of TROCEEDS	
l and total expenses furnished in response to Part C - Quéstion 4.a. This difference is the "adjusted gross proceeds to the issuer."	\$920,000.00	
. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate	,	
and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers, Directors & Affiliates	Payments To Other
Salaries and fees	00	<u> </u>
Purchase of real estate		\$ <u>0</u>
Purchase, rental or leasing and installation of machinery and equipment	0	<u> </u>
Construction or leasing of plant buildings and facilities	0	\$_0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
Repayment of indebtedness		□ \$ 0
Working capital		
Other (specify):		
	Π	□ \$ 0
Column Totals		\$920,000.0
Total Payments Listed (column totals added)		\$920.000.0
Total Tuymence Dicted (evidence deces)		, <u>, , , , , , , , , , , , , , , , , , </u>
D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, on-accredited investor pursuant to paragraph (b)(2) of Rule 502.	r Rule 505, the following the information furnished	g signature constitutes and by the issuer to any
Signature PlantAmerica, Inc. Signature Date	,	
dame of Signer (Print or Type) Title of Signer (Print or Type)		
Aichael P. Ring Attorney		
		,
		· .
	· · · · · · · · · · · · · · · · · · ·	
ATTENTION		•
Intentional misstatements or omissions of fact constitute federal criminal violation	ns (See 18 II S C	1001)

	E CTATE CICKATURE
	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned y authorized person.
	ner (Print or Type) IntAmerica, Inc. Signature Date
Nar	ne of Signer (Print or Type) Title of Signer (Print or Type)

Attorney

Instruction:

Michael P. Ring.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	3 4										
								Disqual	ification State					
	non-ac inves St	to sell to credited tors in ate -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Hem 1)	-	Type of investor and amount purchased n State (Part C-Rem 2)									
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No					
AL					-									
AK			·											
AZ					× .				,					
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NY		х	Series B Preferred Stock - 970,000	10	\$950,000.00									
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APPENDIX

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	non-ac inves St	to sell to credited tors in ate -ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Series B Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Атоилт	Yes	No
PA								-	
RI									
SC							,		
SD	1.								
TN									
TX	. ,								
UT									
VT									
VA		Х	Series B Preferred Stock - 970,000	1'	\$20,000.00				
WA									
WV									
Wi									
WY									
PR									

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